

PURPOSE

To ensure consistency, professional integrity and accuracy in the delivery of behavioral health services and treatments to youth, as needed and identified.

DEFINITIONS

See JRG, JJ Residential Glossary.

**RESPONSIBLE
STAFF**

Designated in the facility standard operating procedure.

PROCEDURE

Each facility is required to develop and implement standard operating procedures (SOPs) relative to the designation of a mental health authority who will be responsible for the oversight and coordination of behavioral health service delivery. This designated authority will also be responsible for providing clinical supervision.

At a minimum, these SOPs must contain the following requirements outlined in this policy.

**BEHAVIORAL
HEALTH SERVICES**

Each program shall designate a certified or licensed mental health professional to coordinate the service delivery system for behavioral health services for the program. The responsibilities of the mental health authority include:

- Oversight, clinical management and authorization of the delivery of mental health, substance abuse, and counseling services including:
 - Certification of services, assessment instruments, comprehensive and substance abuse evaluations, and treatment plans.
 - Psychotropic medication management (if the behavioral health authority is professionally qualified).
- Review and consult with psychiatric and medical staff to ensure the needs of individual youths are being addressed.

- Communicate with staff regarding youths' behavioral health status and care needs to ensure continuity and quality of individual care.
- Oversee the clinical administration of treatment for youths on psychotropic medications.
- Provide weekly supervision of clinical staff.
- Provide peer review of certified or licensed clinical staff.
- Review and sign comprehensive mental health and substance abuse evaluations, treatment plans, treatment plan reviews and suicide risk assessments of non-certified or non-licensed clinical staff.
- Conduct additional assessments as determined by the needs of the youth and conduct group and/or individual therapy, if necessary.
- Serve as part of release/reintegration plan coordination for youths upon completion of the treatment program or otherwise upon discharge.

Mental Health and Behavior Stabilization

Facility directors and/or designees of Mental Health and Behavior Stabilization (MHBS) programs are to provide and complete a comprehensive array of services that include psychiatric and clinical assessments designed to reduce risk of recidivism and stabilize and treat the conditions of mental health/behavioral instability. The level of service intensity is tailored to and based on the needs of the youth and the youth's diagnosis at the time of intake and ongoing progress in the program.

Consideration must be given to completing assessment and subsequent intervention for Fetal Alcohol Spectrum Disorder and Traumatic Brain Injury, as determined by individual youth need.

Youth Trauma

When clinically indicated, facility clinical staff are required to complete a trauma screening and assessment. Consideration must be given to completing assessment and subsequent intervention for

Fetal Alcohol Spectrum Disorder and Traumatic Brain Injury, as determined by individual youth need.

Collaboration with mental health providers to link the youth to evidence-based services and develop strength-based treatment plans will be the responsibility of the designated facility staff.

Human Trafficking

In addition to the assessments outlined in this policy and per RFCJJ contract requirements, certified qualified residential treatment programs must utilize the following types of assessments:

- Biopsychosocial assessment.
- Psychiatric assessment.
- Comprehensive nursing assessment.
- Integrated Behavioral Health Team Assessment.

The assessment tools must be utilized by a professional trained in the identified tool.

Suicidal or Homicidal Youth

Psychiatric hospitalization is a short-term service that should be utilized when a youth presents a risk of harm to self and/or others that cannot be managed while in placement. In collaboration with the youth's juvenile justice specialist (JJS), information about the youth and past services will be needed by Community Mental Health (CMH) and/or the Emergency Department Staff to evaluate the youth for psychiatric hospitalization.

A list of [Community Mental Health Service Provider \(CMHSP\) key contacts](#) can be found on the public website.

Certified Qualified Residential Treatment Programs (QRTP)

In addition to the services above, but not limited to, certified qualified residential treatment programs (QRTP) are required to provide the following services:

Psychiatric Care

Within 15 calendar days of a youth's admission, if necessary, from the youth's treatment plan, the psychiatrist must assess the youth and coordinate with the licensed clinical personnel completing the psychosocial assessment. The psychiatrist must review the youth's medication history, current needs and prescriptions. This includes adjustment of medications and dosage as necessary.

After the first 45 calendar days of a youth's placement, the psychiatrist shall review the youth's current medical and psychiatric needs and prescription or adjustment of medications and dosage as necessary.

Psychological Services

Various professional activities or methods provided by a licensed masters social worker, licensed professional counselor, psychologist, or a limited licensed psychologist, including individual or group therapy, consultation with staff, administering and interpreting psychological tests and working with families.

The facility director or designee must ensure psychological services are provided to youth on an as needed basis, per the youth's Initial Treatment plan and Updated Treatment Plan; see [JRM 201 Residential Treatment Plans, Reentry Plans and Release Reports](#) for more information.

Psychological testing as necessary for assessment and treatment planning. Only professionals trained to administer and interpret psychological tests and whose license includes psychological testing in the scope of practice shall be allowed to provide this service.

Only professionals trained to administer and interpret psychological tests and whose license includes psychological testing in the scope of practice will be allowed to provide psychological testing, as necessary.

Individual or Group Therapy

At least two times per week, direct therapeutic interventions must be provided for each youth individually and/or in group sessions. At least one session per week must be an individual therapy session. Individual and/or group therapy must be provided in accordance with the youth's treatment needs as identified in the youth's treatment plan.

Psychiatric Services

Various professional activities or methods performed by a licensed physician with expertise in mental/behavioral health care. Activities include, diagnostic assessment, individual psychotherapy with evaluation and management, medication review with minimal psychotherapy, individual or group therapy with the youth and consultation with the residential staff. Telehealth may be used when a local psychiatrist is not available.

Psychiatric services, which may include diagnostic assessment, individual psychotherapy with evaluation and management medication review with minimal psychotherapy, individual or group therapy with the youth and consultation with the agency staff. Telepsychiatry may be used when a local psychiatrist is not available. If telepsychiatry is utilized the provider must follow general clinical guidelines for this technology. All services (in-person or telehealth) must be HIPPA compliant.

Psychosocial assessment, if necessary; see [JRM 200, Juvenile Justice Assignment Unit and Admissions](#), and RFCJJ Contract for more information.

The residential care program must provide psychiatric services to an individual youth on an as needed basis according to the youth's treatment plan, engage the family, medical and educational staff and any other relevant individuals involved in the youth's treatment initial and ongoing evaluation process, provide psychiatric consultation or supervision of residential staff as necessary to assist staff in understanding the results of the psychiatric evaluation and implications for the youth's treatment and identification of treatment interventions that are most appropriate for the youth.

Designated facility staff must develop an assessment-based treatment plan within 30 calendar days of placement; see [JRM 201, Treatment Plans, Reentry Plans and Release Reports](#) for more information on assessment-based treatment plans.

See [JRM 340, Psychotropic Medications](#) for more information on psychotropic medications and consent.

LEGAL BASE**Federal****Social Security Act, 42 USC 672(4)(A)**

Requires certified qualified residential treatment programs to have a trauma-informed treatment model that is designed to address the needs, including clinical needs as appropriate, for youth with serious emotional or behavioral disorders or disturbances and can implement the treatment identified by the independent assessor.

POLICY CONTACT

Policy clarification questions may be submitted by juvenile justice supervisors and management to: Juvenile-Justice-Policy@michigan.gov.